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ABSTRACT

Society as a whole has become more transient, creating a weakened network for families in need of assistance. The child care center has the ability to create a support system for families via referrals to outside agencies, support groups, and organizations. This practicum project assessed a strategy to address the difficulty a child care agency may have in linking families with outside resources. The emphasis of the project was to create a training session for administrators and a categorized comprehensive resource directory to assist directors, or other administrators in direct contact with families, in utilizing the services of other agencies, including the process for appropriate referrals. A review of literature and anecdotal examples pointed out the necessity for collaboration in meeting the complex needs of today's family. The solution strategy included interviews with extra-agency family support programs to learn not only what services they provide, but to glean information on successful collaboration. This information was compiled into a brief guidebook to be used as a tool in creating a system of collaboration. The guidebook, in conjunction with the comprehensive resource directory and administrator training, began to equip child care directors with the tools they need to meet their agency's goal of supporting families as partners. The response to the resource directory was favorable, as directors found resources for current families attending their child care centers. (Appendices include the comprehensive resource directory, brief guidebook to collaboration, and training materials. Contains 26 references.) (EV)

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Increasing Family Support Capacity in Child Care Centers Through Regional Networking and Information Sharing

by

Karen L. Rucker

Cohort 1F

A Practicum Report Presented to the
Master's Programs in Life Span Care and Administration
in Partial Fulfillment of the Requirements
for the Degree of Master of Science

NOVA SOUTHEASTERN UNIVERSITY

1997

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Authorship Statement

I hereby testify that this paper and the work it reports are entirely my own. Where is has been necessary to draw from the work of others, published or unpublished, I have acknowledged such work in accordance with accepted scholarly and editorial practice. I give testimony freely, out of respect for the scholarship of other workers in the field and in the hope that my own work, presented here, will earn similar respect.

7/31/97
Date

Signature of Student

Abstract

Increasing family support capacity in child care centers through regional networking and information sharing. Rucker, Karen L., 1997: Practicum Report, Nova Southeastern University, Master's Program in Life Span Care and Administration. Descriptors: Networking/Child Care/Day Care/Preschool/Family Support/Collaboration/Family Resources/Director Referrals/Linking Families with Services/Child Care Outreach.

Society as a whole is more transient, creating a weakened network for families in need of assistance. The child care center has the ability to create a support system for families via referrals to outside agencies, support groups and organizations.

The author presents a strategy to address the difficulty a child care agency may have in linking families with outside resources. The emphasis of this project was to create a training session for administrators and a categorized comprehensive resource directory to assist directors, or other administrators in direct contact with families in utilizing the services of other agencies, including the process for appropriate referrals. A review of literature and anecdotal examples point out the necessity for collaboration in meeting the complex needs of today's family.

The solution strategy included interviews with extra-agency family support programs to learn not only what services they provide, but to glean information on successful collaboration as a guide to the author's agency. This information was compiled into a brief guidebook to be used as a tool in creating a system of collaboration. The guidebook, in conjunction with the comprehensive resource directory and administrator training will began to equip directors in the author's organization with the tools they need to meet the agency's goal of supporting families as partners.

The response to the resource directory was favorable, as Directors immediately found resources for current families attending their child care centers. Appendices include the comprehensive resource directory and brief guidebook to collaboration.

Table of Contents

Chapter		Page
I.	Introduction and Background	7
	The setting in which the problem occurs	8
	The student's role in the setting	10
II.	The Problem	
	Problem statement	13
	Documentation of the problem	14
	Analysis of the problem	18
III.	Goals and Objectives	22
IV.	Solution Strategy	
	Review of existing programs, models and approaches	25
	Proposed solution strategy	29
	Factors effecting the implementation	34
	Methodology	36
V.	Strategy Employed -- Action Taken and Results	39
VI.	Conclusions -- Implications and Recommendations	45
References		49
Appendices		
A.	Calendar Plan for Implementation of Activities	53

B.	Open-Ended Survey to Determine Current Knowledge of Services	58
C.	Checklist of Implementation	60
D.	Brief Guidebook on Resource Utilization	62
E.	Newsletter Article	65
F.	Meeting Agenda to Include Director Training	67
G.	Training Outline	69
H.	Resource Directory of Services Available to Children, Youth & Their Families	71

Chapter 1

Introduction and Background

In recent years, families have become more transient. Currently, the average length of time a family resides in one place is three years. As such, over the course of a lifetime, many people will have moved as often as fourteen times (Frishman, 1984)! With these multiple transitions, it is difficult for a family to maintain a consistent support network. Families are often isolated from former friends and kin, thus limiting the parenting support and guidance that in the past may have otherwise been available to them. Many families are repeatedly in need of having to readjust to new communities, new friends, new jobs, new subcultures, and unfamiliar or unavailable community resources.

The concept of family support is based on the premise that all families will at some time require help to cope with our increasingly complex society. Families are empowered through resource management, problem solving and decision making skills, as well as the ability to mobilize resources effectively. Child care centers have the potential to serve a vital role in linking families with outside services, agencies, support groups and other organizations.

Setting in Which the Problem Occurs

During the course of this practicum project, the author was employed by a large child care company that manages more than 145 corporate sponsored child care centers throughout the United States. These centers serve more than 11,000 children ages six weeks to six years, and their families. Sponsors include hospitals, office parks, government agencies, pharmaceutical companies and other businesses. In general, these corporate sponsors host the centers as a benefit to their employees in an effort to address family needs and to increase worker productivity. Centers range in capacity from 45 to 700, with most serving approximately 100 children daily.

The practicum student's child care center was located in the agency's mid-Atlantic region which, at the time of this project, included the states of Delaware, Pennsylvania, Maryland, and the District of Columbia. Five of the centers were in government buildings, one was on the campus of a major university and the remaining three were business sponsored. Of these nine centers, three were in suburban areas, while the remaining six were in large metropolitan areas, most of which were accessible by public transportation. Because of the geographic locations of the centers in the district noted above, it was not uncommon to have families attend the same center, but reside in three or more different states.

Centers in the author's company strove for accreditation through the National Association for the Education of Young Children (NAEYC) and, therefore, tended to maintain lower staff to child ratios than is required by most state licensing regulations. As a result, the rates for these centers tended to be higher than most neighboring child care centers, regardless of the particular geographic region. This financially impacted the population being served, such that most clients in the mid-Atlantic region were two parent, dual income families. Many of the parents were employed in professional fields such as engineering, research, law or medicine. Some centers accepted a limited number of Purchase of Care slots -- usually no more than two to four percent of the total space available. (Purchase of Care is a government sponsored program of child care assistance for low income families.) Unfortunately, a center is typically paid for state-assisted slots at a rate as low as a center's usual fee, so that it is often difficult for centers to offer very many slots if they want to remain fiscally solvent. Some centers had a Board of Directors whose primary function was to raise monies for tuition assistance and present scholarships to low income families.

The mission of the company that employed the author was to "create innovative child care programs that help young children reach their full potential." Shortly before the project began, the mission statement was revised to include the statement that "Every day we must strive to support families as

partners." At a company-wide Directors' retreat, the emphasis was shifted to view all decisions in holistic terms. To consider not only how the decision will impact the child, but also the family as a whole, the corporate sponsor as a whole, the company's fiscal health and the commitment to help each other grow professionally. This new approach to decision making was more ecological, as it did not focus solely the child's interests. Newly released marketing materials touted a "holistic approach to caring for children," declaring the company's new commitment to serve the entire family.

Student's Role in the Setting

At the point of this practicum project, the student was the Director of a medium sized, government sponsored child care center located in a major metropolitan area. As the Director, was her responsibility to realize the new family-oriented mission in concrete ways; to demonstrate the concept of family as partners in the decision making process, whether it be curriculum development; or services for their children and themselves; or centerwide policy decisions.

In working with families, one of my Director's roles is to identify problems to be addressed, including developmental delays, behavioral problems, potential medical disorders, and other difficulties. It was the

procedure of the author's agency to involve the family as much as possible in identifying possible sources of a problem and to strategize together on solutions. Directors were not always equipped, however, to handle some situations, such that it may have been more suitable for an outside agency to address the issue and work with the family directly, either on- or off-site. Knowing what resources are available in the community to families and how to access them appropriately would be critical in order for Director's at the author's company to be effective in this process.

In the student's former role as District Education Coordinator, she was occasionally called upon to assist in assessing a child at another center to determine solution strategies and to assess whether or not outside services were required. Sometimes this would lead to a consultation with the family and faculty to problem solve the situation. This relationship with the other centers in the district facilitated the likelihood that the student would be able to implement a practicum strategy.

Factors that contributed to the success of the practicum project, in addition to the author's problem solving ability, included positive relationships with other directors in the Mid-Atlantic District. Also useful was the administrative authority as Director to plan and dictate the use of one's time. Prior roles that prepared the practicum student for this project included former employment with a non-profit family support program that focused on assisting

families in obtaining public assistance for housing, child care, food assistance and other public services. Previous training experiences included not only the role as District Education Coordinator, but several years experience teaching. The responsibilities of which included the development of numerous curriculum designs; one for intergenerational programming. The organizational and logic skills that are required in adequate curriculum development proved useful in the completion of the practicum project. Finally, and of equal importance, was the student's desire to serve the families in her care to the best of her ability.

Chapter 2

Problem Statement

Child care centers in the mid-Atlantic region of the author's company were unable to fully realize the new component of the revised mission statement to support families as partners, due to a lack of adequate knowledge of outside agencies, programs, support groups, specialists, or entitlements for families in crisis that attended our programs. This problem was compounded by the broad geographic region that each center enrolled families from, such that a director may have been knowledgeable of the services available in one state, but served families residing in another state (or states) who were unable to use those services.

At the time of implementation, no central information source was readily available to child care centers that could assist the Directors in leading families to services that were available through private, public and government agencies. Clearly a central information source or system was needed. Families with children ages birth to six years would benefit if they could utilize the Center Director as a resource for information and support in obtaining appropriate services.

Documentation of the Problem

Barbara Bowman, in a keynote address at the 1995 Annual Conference of NAEYC's Institute for Early Childhood Professional Development, discussed the increased challenges facing America's families and the potential long range impact on their children. She stated that a greater number of families are trying to cope with stressors, and that these stressors are the most intense families have had to face since the Great Depression. Concurrently, the general public has become more self-serving, turning their perspective toward children of their own demographic group, versus the needs of all children in our society. One answer suggested by Bowman was to rethink the way we train education professionals to stress more collaboration with other professions; a more interdisciplinary approach would be necessary to best serve children and their families.

In 1988, a statement was issued by a representative of the National Association of State Boards of Education, which likewise called for a new focus in early childhood education. Their plea was for schools and agencies to partner in the collaboration of services to create a comprehensive system for families and programs available to them. They stated that parents generally view the Administrator as knowledgeable in all areas relating to the care and development of their children. As a result, s/he is expected to be a

resource in identifying and solving problems. Awareness of outside resources is then an important vehicle to assist the parent and child in coping with a situation (Good, 1996). This access and use of community resources empowers the parent to nurture and protect their child (Pizzo, 1993). Services can include not only public and government services, but also the opportunity to network with other adults (Galinsky, 1984) to share time, personal skills, experiences and solutions with one another.

A family strengths model wherein the director works with the family as a whole -- such that the center and the family partner together with the child as the common bond -- requires the Director to be aware of a multitude of family support services (Gage & Workman, 1994). The individual program and its director can not possibly offer all of the services a family may require in order to best meet the needs of the child and its family (Strimple, 1992). Knowledge of external services and collaboration with other agencies is an opportunity for the Director of a child care center to facilitate family resources and solutions.

The geographic region of the Mid-Atlantic District of the author's company was very transient. It was not uncommon, for example, for new parents to feel isolated and disconnected from the community. Networking through the center assisted them, for example, in finding weekend care for their children or obtaining suggestions for area pediatricians and specialists. This opportunity for the development of relationships is the building block in creating a center

community (Bloom, 1995). The more choices a family has in seeking services, the more they feel they are part of a larger community (Davidson, 1995). This sense of community is important to prevent a sense of isolation and lack of support which will often lead a family to experience disempowerment (Pizzo, 1993).

The parent of the special needs child or the child with a chronic illness are especially at risk of disempowerment due to the high stress associated with their situation (Turnbull & Turnbull, 1978, 1985; Pizzo 1983, 1987, 1990; Zero to Three/NCCIP, 1985). This disempowerment can lead to reduced confidence, reduced hope in the situation and greater uncertainty about acquiring resources (Kagan, Powell, Weissbourd & Zigler, 1987). As a Director, linking the family with appropriate services and resources can be critical (Gage & Workman, 1994; Mazzocco & O'Connor, 1993), but it can also be difficult as knowledge of what resources are available was not always accessible in our district. No central information source or clearinghouse existed. In the practicum student's center a family of a special needs family was caught in the gap between Part B and Part H services. The child had turned three and had to move between programs to continue services. Difficulties faced by the family in receiving services in the new program were complicated by the Director's lack of information on contact persons and procedures for referral.

Another family adopted two children from Russia. Several problems immediately emerged that pronounced the need to have information about outside services. Much time was spent locating a translator to devise a list of key Russian phrases and researching the resources available for counseling the parents, whose expectations for children removed from a foreign orphanage to an entirely new culture were not appropriate. This situation was compounded by confusion over the public school age requirements for mandatory attendance, as one of the children was of school age, and her placement in a group care setting created problems with Immigration officials. The great need for access to a support group of other adoptive parents was an additional challenge. This situation would have been greatly facilitated with a ready source of information on services prior to its need during a crisis situation.

This problem as it existed at the author's agency was further documented during the practicum project through an on-site or telephone interview with Directors to gather information about their challenges when referring families to extra-agency services. An informal survey (as shown in Appendix B) was constructed with a set of questions to assess Director awareness of services available in their geographic area and in other areas in which their families resided. Of particular focus was access to government programs including Part B; Part H; food stamps; Medicare; child care assistance (both through the federal and state governments); assistance to federal

employees; issues surrounding immigration and out of country adoptions; single parent resources; death; counseling services; child abuse; diagnosis and appropriate therapy for learning disabilities and developmental delays; and the availability of support groups and warm-lines for various issues. All of these items had at some point effected enrolled families at the agency's centers in the prior eighteen months.

To document this problem in similar agencies, the student contacted other family service programs to see what systems they currently had in place for family referrals, how this information was communicated to workers and how these systems were initially created.

Data was assembled of resources available in the Mid-Atlantic geographic region, as well as some central contact lines for national agencies. This information was gathered through research, agency contacts, interviews with appropriate representatives of specialist groups, and by asking other Directors what resources they had found most useful in the past. Additionally, Directors were surveyed to discover what types of information would be most useful to them and whether or not they felt a directory of services would be useful.

Analysis of the Problem

There were a number of factors that contributed to the presence of this problem in the agency's child care setting. Part of the problem is a mind-set wherein early childhood professionals tend to focus intently on the child and view the family as periphery; if not a threat to the child's developmental progress (Larner, 1995). In general, the field places little emphasis on the importance of understanding relationships and their impact on the stability of children (Bowman, 1995). Most Early Childhood Education bachelor degree programs, for example, include no course requirements (or very limited course requirements) on family systems and support (Bowman, 1995).

Being a relatively new field, Early Childhood is still evolving and family support has only in recent years consistently been introduced into the literature. As a result, Directors are not necessarily aware of their role in supporting families and, in deed, may not consider it a primary function. The intensive Director orientation offered by the student's company at the time of implementation of the practicum project did not include any information on family support. Even the Director's job description did not include this responsibility. Hopefully the company's new focus on an ecological approach versus a child-centered approach to decision making, as introduced in the Directors' retreat, will address family needs more universally in the future.

Another issue that inhibited the acquisition and disbursement of information on family support services available in the mid-Atlantic region was the transient nature of administrators in this geographic area. Three Directors had moved to the area in the past year, thus disconnecting themselves from former networks and contact persons. Two Directors lived in one state, but led a center in another state. Additionally, the newly appointed District Manager was relatively new to the area, having moved there within the past two years.

Traditionally, child care centers are disconnected from traditional family service programs. Their knowledge is not given validity, in part because early childhood is still a field that is struggling for professional recognition. Child care centers are, however, likely to be the first contact the family has that may be able to identify learning or behavior problems, since they see the child over a long period of time in relation to other children of similar developmental stages (Strimple, 1992). An example would be a child in a northern center that was referred to the school district for possible autism. Despite the center's initial recognition of a problem and referral to services, at no time did the school system ask for documentation of behaviors or symptoms. A representative was invited to attend the subsequent IEP (Individual Educational Plan). It was requested that the representative be a viewer versus a participant, despite the fact that the IEP would be partially executed at the child care facility.

Another example would be a Mid-Atlantic medical organization that formed a task force to address the high infant mortality rate in the state. One of the proposed solutions was to offer parent education on developmentally appropriate expectations for children under the age of two. Child care providers had not been considered as source for parent education programs. As child care provider have direct contact with families on a daily basis, it seemed logical to offer these programs in the child care setting. Had a professional of the child care community not chosen to attend this town meeting, it is difficult to determine if this solution would have been presented as a possibility.

Edelman (1987) emphasized the importance of a community-based collaboration system in meeting the complex needs of families. Since it is projected that by the year 2000, approximately 75% of all parents will work outside of the home (Zigler, 1987), many of them requiring the services of a child care facility, collaborating to offer parent education in that setting would meet a considerable community need.

Chapter 3

Goal of the Practicum Project

The goal of the practicum project was to provide information and training to the directors of seven child care centers in the student's agency on extra-agency family support services that were available in the region, what referral process these services require, and collaborative efforts currently existing between agencies, in order to better prepare the directors to serve the needs of their client families.

Objectives

By the end of the ten-week implementation period, the following five objectives were met.

Objective 1

A brief guidebook on resource utilization, based on current practice of ten agencies involved in family support services, was prepared and distributed to all

center directors in the district, including information on the different systems of supporting families in use by these ten agencies.

Objective 2

A comprehensive directory of categorized resources available to families was produced and distributed to all centers in the district. Categories included need areas as defined by the directors, based on interviews requesting information about their prior experiences in working with families at their center.

Objective 3

At least 80% of the agency directors in the identified seven centers participated in a training session on family support resources and services available to clients, guidelines for making appropriate referrals, and suggestions for successful collaboration between agencies.

Objective 4

The agenda of the monthly district meetings was expanded to include time for the sharing of resource information between Directors.

Objective 5

The quarterly district newsletter began to include a regular column providing information about resources available to families, current collaboration between our company and other agencies, and the appropriate procedure for referrals.

Chapter 4

Review of Existing Programs, Models and Approaches

In the mid-nineties, the Delaware Perinatal Association in conjunction with the News Journal papers began to focus on the high infant mortality rate in the State of Delaware. Titled the Cradle of Hope, a forum of agency leaders across the state met to discuss possible reasons and solutions for this continuing problem. It was decided that family services were available in great abundance, and in fact more than fifty agencies were identified and in attendance at the forum. Many of the agencies offered overlapping services. It became evident that the amount of services available to families was not the problem. The problem was in part that information about the available services was difficult to obtain and, subsequently, very little collaboration existed between programs. One solution that was presented was the creation of a directory of agencies so that collaborations could be facilitated to streamline the number of programs a family would need to access and to reduce the number of dis-joint services received. Since the focus of the forum was medical in nature, the directory consisted primarily of medically related services, as well as agencies

that offered parenting information. This directory was then distributed to all participants at the forum.

After Congress passed Part H of the IDEA, the Delaware Department of Services to Children, Youth and Their Families worked extensively to create a directory of family support services available to children and their parents. The directory included counseling services, agencies that work with children diagnosed with developmental delays, and private medical providers. A mailing was sent out to all child care centers, inviting them to a one day conference outlining services available and providing each participant with a comprehensive categorized directory. This directory was updated annually and mailed to prior conference participants as an on-going agency resource.

Atlanta, Georgia had at the time of this project, a very successful family support system of programs called Sheltering Arms, Inc. Originating as a sewing circle whose goal was to clothe children of the street, the program grew to include numerous child care centers in or near Atlanta that offered a full range of family services. They employed a Family Support Coordinator full-time in each center whose role was to not only offer parenting education, but to assess family needs and link them to community services. Through collaboration with outside agencies, Sheltering Arms was so successful at accessing needed

family services, that they were contracted by the Georgia Child Care Council to provide technical assistance to other providers across the state (Miller, Replogle & Weiss, 1995). Clearly, having a staff person whose primary focus was assessment and collaboration contributed to the ability of their program to more fully meet the needs of families in their program.

The Davis County School District in Utah operated the Parent Education Resource Center (PERC). This program serves as a central clearinghouse for community resources. Families are referred to PERC for services, who then referred them to agencies in the community that addressed the service needed. Their goal was to be preventative in nature, meeting the needs of families and placing an emphasis on parenting education (Kagan, 1987).

In Winnetka, Illinois the Winnetka Alliance for Early Childhood set out in 1989 to engage the entire community in setting a goal of supporting families, embracing the proverb "It takes an entire village to raise a child." One component of their efforts was to collaborate community services for children and their families. The goal was to have all early childhood related agencies work together under one referral system, including the school, psychologists, libraries, social workers, pediatricians, and other related family providers

(Bundy, 1995). They organized themselves through an assessment survey, followed by the creation of a task force and symposium to develop policies that would facilitate collaboration of services. This orchestration of services provided families in the community with comprehensive services that were less likely to be dis-joint in nature.

These examples of approaches to providing a full range of services to families all place an emphasis on the necessity of the collaboration of services between agencies. The paradigm shift of an entire community in Illinois is certainly the ideal, as has also been demonstrated by the Italian city, Reggio Emilia. Their constituents made a commitment to focus on children and their families after the devastation of World War II and have served as a role model to early childhood educators. From an agency perspective, the key is to begin the collaboration of services and to have a centralized source of information to facilitate this process. It is with this intent that the primary focus of this practicum project was to train agency directors in the process of collaboration and to provide them with information that would increase their ability to refer families to agencies, organizations, and support groups that could meet the complex needs of today's American family.

Proposed Solution Strategy

In speaking to other directors and in reviewing literature in the field, it seemed the best way to start to meet our mission of supporting families as partners was to better acquaint ourselves with the services offered by extra-agency programs. Information on what specific services they provided and how to appropriately refer clients to them was important to serving family needs that were not currently available by our centers. A survey of programs who are successfully collaborating with other agencies served as a model available to our centers in methods of initiating collaborations as well as systems for continuing those collaborations. The development of a categorized comprehensive directory of services available from both public and private agencies, similar to the directories developed by the programs described above, would serve as an on-going central information resource to directors in linking families with outside services.

To achieve the practicum goal of providing information and training to the directors of seven child care centers in the Mid-Atlantic region of the student's agency on extra-agency family support services that are available in the region, what referral process these services require, and collaborative efforts currently existing between agencies, the following solution strategies were to be employed for each of the five objectives.

Objective 1

The first objective was to create and distribute a brief guidebook to all center directors in the district summarizing current practices of at least ten agencies involved in family support services, including information on the different systems they use to support families. Steps planned to accomplish this objective were as follows.

1. Using the Family Resource Coalition book titled Programs to Strengthen Families: A Resource Guide, a minimum of three agencies which serve populations similar to the centers in our district were to be identified. These agencies were then to be contacted by telephone to request an information gathering interview appointment to learn more about the services they offer their families, how the decision was made to offer these services and what systems are in place to collaborate with other agencies. Suggestions on successful collaboration practices was also to be gathered.

2. The local directors' professional organization and the local resource & referral agency were to be contacted to identify agencies providing services to families in the author's identified geographic region. A minimum of five local agencies that offer family support services were to be contacted to set up an information gathering interview to obtain information on services offered, referral procedures and suggestions for successful collaborations with their agency.

Appointments were to be conducted by telephone or on-site at the identified agency.

3. Once a minimum of ten agencies were interviewed, the information was to be compiled regarding the types of services offered, methods of referral and collaboration suggestions.

4. The brief guidebook summarizing resource utilization by the ten identified agencies was to be distributed to all center directors in attendance at a district meeting. A discussion was to be held on the origin of the guidebook and its usefulness as examples of successful collaborations which could be used as a tool in setting up collaborations with our center and other agencies. Any director not in attendance was to receive a copy in the mail, accompanied by a follow-up phone call discussing its purpose.

Objective 2

The second objective was to create a comprehensive directory of categorized resources available to families and to distribute it to all directors in the district. Steps planned to accomplish this objective were as follows.

1. Interview the director of each of the seven centers to identify need areas that they have required resource information on during prior experiences working with families in their centers.

2. Starting with the needs identified by the directors, information was to be compiled on agencies, programs, support groups, specialists, or entitlements that support families. Information would include address, phone number, contact person (if available), and a brief summary of services provided, as well as available criteria to meet their target population. Information was to be gathered from public libraries, the internet, family periodicals available in the area, the newspaper, the chamber of commerce, phone calls to agencies listed in the blue pages of the local telephone directory, interviews with directors of other child care agencies, local hospitals, the ten agencies interviewed in Objective 1, and the Department of Services to Children, Youth and Their Families. Information was also to be included on entitlements, specifically Part H, Part B and governmental child care assistance programs, many of which are used or could be used by families in the centers' care.

3. All information gathered was to be compiled into a categorized resource directory.

4. The completed resource directory was to be distributed to all directors during a monthly district meeting.

Objective 3

The third objective was to have at least 80% of the seven agency directors complete a training session on family support resources and services available

to clients, to include guidelines for making appropriate referrals, and suggestions for successful collaboration between agencies. Steps planned to accomplish this objective were as follows.

1. Based on the information obtained in the completion of Objective 1 and Objective 2, a training session was to be planned that would last a minimum of 45-60 minutes in length.

2. The training session was to be scheduled to present all referral information obtained to the directors. A successful session would have a minimum of 80% of the directors of the seven targeted centers present. Time was to be allowed at the end for open questions and answers, as well as time to share additional resources that may not have been included in the resource directory.

Objective 4

The fourth objective was to have the regular monthly district meeting expanded to include time to share resource information. Steps planned to accomplish this objective were as follows.

1. Discuss with the District Manager the importance of resource information in better serving families at the seven identified centers.

2. Request that time be slated at the monthly meetings for directors to share information about resources available to families and current collaboration with other agencies.

Objective 5

The fifth objective was to have a regular column appear in the quarterly district newsletter providing information about available resources, current collaboration between our company and other agencies, and the procedure for appropriate referrals. Steps planned to accomplish this objective were as follows.

1. Contact the editor of the district newsletter to discuss ideas about the column and ask how much page space would be available in each issue to include this information.

2. Student was to write the first column for the upcoming edition of the newsletter. At the end of the article, it was to be stated that this is to be a regular feature of the newsletter and encourage readers to submit family resource service information to the column in upcoming issues.

Factors effecting implementation

A number of factors surrounding the practicum project facilitated its implementation. The first factor was that a categorized resource directory was greatly needed as no current vehicle existed at the seven centers for linking families to outside resources. The student and her colleagues were unable to

offer adequate services to families without this information, so that compiling it was a motivator due to high student and coworker interest.

Formerly the student served in the role of District Education Coordinator. As a result, the student already had a strong rapport with other directors in the district. As a result, the cooperation in the practicum project was favorable. The group of directors as a whole had an excellent rapport and were eager to share information with one another. The editor of the district newsletter had actively been pursuing article submission by Directors and other employees. A regular column contributed by co-workers fulfilled that need. Additionally, the District Manager was aware that the practicum student was near the conclusion of her Master's program and wanted to facilitate its completion.

Outside agencies cooperated with the practicum student because knowledge of their program would increase the likelihood that they would receive referrals from the student's agency.

There were some factors that were a concern, as they had the potential to impede the progress of the practicum project, the biggest of which was the time demands of the student's current job position. Some possible solutions to this problem would include speaking to the District Manager about switching to four eleven hour days for the duration of the practicum implementation. This would leave one full business day per week to devote to the project. If this solution was not an acceptable option, then it could be

proposed that the student work five days, but on two mornings per week not go into the office until noon, devoting the early part of the day to the practicum. (This would not necessarily reduce the number of work hours, but would provide time during the regular business day to contact other agencies, thus still netting a minimum work week of forty hours.)

Another potential factor that was a danger to impeding the implementation of the practicum project would be if the identified agencies in Objective 1 did not cooperate with the information gathering request. Possible solutions would include selecting other agencies to participate in the project as there were numerous agencies available in the area that offer family support programs. Another possible solution to this problem would be to contact other cohort students, particularly those who attended Summer Institute with the practicum student, to gather information about their agencies, since the student already had a relationship with them.

Methodology

In order to monitor the progress of the practicum project a checklist was created based on the ten week calendar of implementation. This checklist, which is included as Appendix A, served to keep the tasks of the practicum on the timeline and to indicate the need for any mid-course corrections. Since most

of the data collection for this practicum was relatively straight-forward and the project lent itself to a variety of options in terms of who or which agency information was collected from, the timeliness of task completion would be the most critical component. One possible foreseeable problem mid-course would have been if the student or the validator left employment at the current agency. Should this have occurred, the student would have consulted with the practicum advisor for advice on the best course of action.

The measurements of success on the practicum project would be evidenced by the end of the 10-week implementation period via the following indicators.

1. The completion and distribution of a guidebook to all directors in the agency's district on resource utilization, based on the current practice of at least ten outside agencies. A copy of the finished guidebook, would provide evidence of this task.
2. The completion and distribution of the categorized resource directory. A copy of the directory would be evidence of this task.
3. The completion and submission of a newsletter article as outlined in Objective 5. A copy of the newsletter article will be submitted as an addendum to this report.

4. The addition of time at district meetings for directors to share resource information would be evidenced by a copy of at least one monthly agenda attached to the final practicum report. (At the time of the practicum project, minutes were not maintained of meetings, therefore, the agenda would be the indicator that a discussion had taken place.)
5. Completion of the director training on resources, systems collaboration with outside agencies, and making appropriate referrals to be completed with an attendance rate of at least 80% of agency directors in the seven centers targeted would be documented via a training content outline and an attendance roster attached to the final practicum report.

Chapter 5

Strategy Employed -- Action Taken and Results

The goal of the practicum project was to provide information and training to the directors of seven targeted child care centers in the Mid-Atlantic district of the author's company on extra-agency family support services available in their region. Ideally, this would better prepare them to serve the needs of their client families. Five objectives were set to achieve this goal. These objectives included; the creation of a guide to collaboration, the development of a comprehensive resource directory of services available to families, and a training session for Directors on utilizing family support resources. To encourage future discussions of family support and the sharing of information on resources available in the community, the expansion of the monthly meeting agenda was to include time for this topic. Additionally, a regular feature in the district-wide newsletter was to be created to share similar information. All five objectives were met during the course of ten weeks as these activities were implemented by the practicum student.

This project began with the informal inquiry of agency directors and other child care professionals to determine which services they currently had

knowledge of and were using on a regular basis (See Appendix B). Administrators were asked to discuss challenges they confront in serving the families enrolled in their center. Five of the centers located in a shared geographic region primarily funneled all of their referrals through the same agency; a for-profit consortium of psychologists and social workers. Early in the questioning it became apparent that Director's were frustrated by the lack of a centralized information source for services to families. As a group they wanted to help families as best as they could, but a narrow referral channel hampered their efforts. Additionally, there was a wide spread lack of knowledge of government entitlements and how to access these services.

When asked if a directory of services would be useful, the unanimous response was that it would be very useful. A similar response was received by other child care professionals when posed this question at meetings, seminars, trainings, and conferences attended by the author.

Agencies were identified for inclusion in the guidebook. Through visits and telephone conversations, information was gathered for the guidebook. The author had expected to learn of extensive or complicated referral procedures, and complex explanations of either referral systems or methods of collaboration with other agencies. Of the agencies contacted, referrals were not systematized in a formal manner. Most required only a phone call and written

consent from the family. All agencies were anxious to collaborate in an effort to serve families more fully. As a result, the guidebook became a brief discussion about the enormous task of any one agency to try to fulfill all the needs, of all their constituents, all the time. The discussion concluded with encouragement to seek out other family support services as there is a mutual goal met for both agencies when collaboration occurs. A sample of the guidebook is included in Appendix D.

Information gathering for the resource directory began early in the project. Literature was collected over a period of nine weeks from a variety of resources. Public libraries were repeatedly visited to gather fliers, pamphlets and numerous family-related newspapers published in the area. Bulletin boards at local supermarkets, fitness centers, community centers and any other bulletin board the student encountered were regularly visited to acquire information. All local newspapers were read daily to identify resources through articles about their agency or advertisements. The blue pages of the telephone directory, as well as a scan of the directory's contents, was an additional source of contact information. Two local Chambers of Commerce were asked to provide information on members who offered services to children and families.

Information was gathered on agencies, organizations, support groups, presenters of parenting classes, diagnosticians, specialists, and

entitlements for children and their families. The providers were categorized for easier information access into the following categories; Adoption, Alcoholism, Blind/Visually Impaired, Breastfeeding, Cultural Programs, Deaf, Death/Dying/Bereavement, Diagnostic Services, Domestic Violence & Child Abuse, Family Services & Support, Government Programs, Health Related Issues, Information Lines, Mental Health Issues, Parenting Classes, SIDS: Sudden Infant Death Syndrome, Single Parenting, Special Needs, and Stuttering. An additional brief section was included on internet resources recommended.

The Resource Directory included not only local organizations, but numbers for the national headquarters so the reader could contact that number to learn of local providers to serve their parent population. A table of contents was included, as well as an alphabetical listing of all agencies in the directory. An index assisted the reader in cross-referencing multi-service agencies. A copy of the Resource Directory is included in Appendix H.

The editor of the District newsletter was contacted regarding the inclusion of a monthly article about family support agencies available in the area. Upon learning that the student would author the first several articles, it was determined that this would be a welcome addition to the quarterly publication.

The upcoming issue will include the first article, a copy of which is provided in Appendix E.

At the monthly District Meeting, the practicum project was added to the agenda in order for the student to present the directory and a training session to Directors in attendance. In all, eleven administrators from nine centers were in attendance. This exceeded the targeted 80% of seven identified centers, which was originally set as a goal. Roadblocks to a lengthy training were an over-extended list of agenda items and the timing of the training. The items on the agenda prior to the training took longer than anticipated, such that the author was not able to take the floor until 11:45 a.m. With lunch pending, the training was truncated to 20 minutes. Discussion was held on the events that led to the decision to choose the Directory as a project. It was agreed that this resource was needed to fill an agency void in service to families. The Directory was presented and many agencies were highlighted in discussion, especially those available from local, state and federal government. The Directory was very well received by all in attendance. They were enthusiastic about the project and look forward to ongoing additions.

Due to the time constraints, the guidebook was not presented at that meeting and was rescheduled for the next District Meeting, which was to occur after the end of the ten-week implementation.

The District Manager was instrumental in the successful completion of this project. She allowed the practicum student the flexibility to alter her work schedule as needed to complete the project. Unfortunately, the unusual demands of the author's child care center during the ten-week implementation period made it very difficult to devote as much time as had been hoped to the practicum.

One unexpected positive outcome of this project was its usefulness for Board Members of the student's child care center. The Board's primary goal is to raise money for tuition assistance for low income families. Applicants are screened by the Board and awarded a monthly allotment if qualifications are met. Board members were excited to learn of other agencies and organizations that provide child care monies or other financial assistance to families in need. The information in the Resource Directory was useful in allowing them to further help identified families with not only additional child care monies, but other family services as well.

Chapter 6

Conclusions -- Implications and Recommendations

Families have complex needs. No single agency can be expected to fully provide all of the services their clients may require, however, with the proper tool the agency can link the family to outside resources that may be helpful to them. This practicum project was designed to assist Administrators in locating other agencies or organizations that provide family support. The idea for the project originated when the author moved to a new geographic region, becoming disconnected from her former network of providers. Having previously relied on the annual directory distributed by the Delaware Department of Services to Children, Youth & Their Families described in chapter four, the author constructed her objective of producing a resource directory based on this model. A similar directory would be useful in extending the resource network for the Directors in a targeted geographic region of the student's agency.

As was discovered by the Delaware Perinatal Association's experience, the amount of available services to families was not the problem. The problem was a lack of information in the author's agency on what these resources were, and how to access them. On-going discussion over time would

be required to ensure that family support continued as an extension of the company's mission statement.

To address the agency need to increase Administrator knowledge of community support services, the practicum project was developed. The Resource Directory and the concept of an on-going newsletter article were well received by Administrators in the student's agency. This information was perceived as vital to better serving the children and families enrolled in the company's centers. Overall, the practicum project was a success. Directors are beginning to share resource information and to think more holistically in their approach to family services.

The creation of the Resource Directory and subsequent introduction of its usefulness to Administrators in the author's agency was an important accomplishment that will be a service to families in times to come. The author was requested to submit a copy to both the Vice President of South East Operations and the Human Resources Director at Central Office in the student's agency. Future plans are to continue working on the Directory in order to expand its scope. Ten weeks was not enough time to develop a truly comprehensive Directory as originally envisioned by the author. A number of the agencies listed were from the author's home state. A final edition would include nationally available resources. The author hopes to gain home access

to the internet, as the addition of web-site addresses would make this information more useful to a broader audience.

Ideally within nine to twelve months the Resource Directory would be completed and made available nationwide to centers in the student's agency. This would be an especially useful tool to new Directors who have not yet developed a network for information gathering.

Once the final guide has been distributed within the host company, the author would like to research the possibility of grant monies to finance a mass publication. The Resource Directory would then be available to centers outside of the student's agency at a nominal fee to cover any shipping costs. The challenge would be in keeping the information current. New agencies will come into existence. Current agencies may change phone numbers, services provided, geographic location, or discontinue services all together. An annual update similar to the process currently used by the Delaware Department of Services to Children, Youth and Their Families, may be one solution. There would however be a time lag in updating, reprinting and distributing this revision.

An alternate possibility would be to create a web site that would be accessible via the internet. Information could be updated more frequently and the timeliness of access would be greatly increased. With assistance from someone experienced in web-site creation, the ideal situation would be to have

the web page linked to agency sites, so the user could have an expanded source of information and even more accurate data.

Child care is a field with such incredibly high turnover, that a comprehensive source of family support services is critical to prevent the loss of information when a center experiences a new Director. To facilitate use of this Resource Directory and the importance of linking families to other services, the author would like to be able to present the practicum experience at local child care conferences, providing the Directory -- or web site address -- to all in attendance. This broad-spread community networking should ultimately benefit numerous families.

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APPENDIX A

Calendar Plan for Implementation Activities

Calendar Plan for Implementation Activities

In order to complete all tasks necessary to realize the goal and objectives set forth in this practicum project, the following calendar plan for implementation will be executed.

Week 1

- Speak to the local child care directors association and the local resource and referral agency to obtain recommendations for the selection of a minimum of five agencies offering family support programs. Contact these identified agencies to schedule an information gathering session on the services offered, referral procedures and suggestions for successful collaboration with their agency. Complete 2-4 interviews by Friday of this week.
- Select a minimum of three programs from the FRC guide to family support programs that are outside of the student's district but serve similar target populations. Contact the program to schedule a phone session to gather information on services provided, referral procedures and suggestions for successful collaboration. Complete at least two interviews sessions by Friday of this week.
- Telephone interview the director of each center in the district to identify need areas that they have required resource information on during prior experiences working with families in their care.

- Speak to the District Manager about plans for the practicum project and receive permission to present a training session to directors. Determine a date for the training session and have it marked on the district calendar. Discuss the importance of resource information in better serving our families at the seven centers that share a similar geographic region. Request that time be slated at the monthly meetings for directors to share resource information and current collaborations.

Week 2

- Continue interviews with the ten agencies identified in week 1.
- Begin gathering resource information about family service agencies, support groups, specialists, and entitlements. Use the public library, internet, local newspaper, family periodicals, chamber of commerce, blue pages of the telephone directory, other child care directors, and the Department of Services to Children, Youth and Their Families to obtain information. Write a brief summary of each service provided, including name, address, phone number and, if applicable, procedure for appropriate referral.
- Leave a voicemail for directors telling them about the new agenda item and asking them to bring information about current family support resources in use by their center to the next district meeting.

Week 3

- Contact the editor of the district newsletter to discuss the idea of a monthly column on resource information and ask how much page space will be available in each issue for this column. Make a commitment to write the first column, including a section encouraging readers to submit information for upcoming issues.

Week 4

- Begin compiling the information from the ten agencies identified in week 1, into a readable format.
- Write and submit column to district newsletter.

Week 5

- Complete guidebook of ten agencies identified in week 1.
- Have an agenda item added to the monthly district meeting to share community resources currently in use.

Week 7

- Based on the information gathered from the ten agencies identified in week 1 and additional information gathered in completing the categorized resource

directory, create a training session for directors on referral and collaboration with other agencies. Inform directors of date for training session.

Week 8

- Complete categorized resource directory

Week 10

- Distribute guidebook to all directors in the student's agency that work in the same district. Discuss the origin of the guidebook and its usefulness as examples of current collaborations which can be used as a tool in setting up similar collaborations between our agency and other agencies. Mail copy to directors not in attendance. Follow up the mailing with an information phone call.
- Distribute categorized resource directory to all directors in the student's district.
- Conduct training session for directors, having a minimum attendance of 80%.

APPENDIX B

Open-Ended Survey to Determine Current Knowledge of Services

Open-Ended Survey to Determine Current Knowledge of Services

1. What outside services or agencies do you currently use to provide family support services to families enrolled in your center? How did you learn of these services or agencies?
2. Do you know how to access government services for your families?

If the respondent was currently using more than one agency:
Do you have suggestions for inclusion in the Resource Directory (particularly in the areas of government programs, immigration & adoption issues, single parenting, death, counseling services, diagnosticians, support groups, special needs, and warmlines)?

3. Do you feel a resource directory would be useful? What types of information and format would you recommend?

APPENDIX C

Checklist of Implementation

Checklist of Implementation

___ Select a minimum of ten agencies offering family support programs.

___ Contact these identified agencies to schedule an information gathering session on the services offered, referral procedures and suggestions for successful collaboration with their agency.

___ Complete guidebook of resource utility.

___ Telephone interview child care directors to identify need areas that they have required resource information on during prior experiences working with families in their care.

___ Speak to the District Manager about plans for the project and receive permission to present a training session to Directors. Determine date. Request that time be devoted to all meetings forward to share family resource information and current collaborations.

___ Gather resource information about family service agencies, support groups, specialists, and entitlements. Write a brief summary of each service provided, including name, phone number, and if applicable, procedure for appropriate referral.

___ Contact the editor of the district newsletter to discuss the idea of a monthly column on resource information and ask about page space in each issue available for this column.

___ Write first column, including a section encouraging readers to submit information for upcoming issues.

___ Create a training session for directors on referral and collaboration with other agencies based on the information gathered from the ten agencies interviewed and additional information gathered in completing the categorized resource directory.

___ Conduct training session for directors.

___ Distribute guidebook to all directors in district. Discuss origin of guidebook and its usefulness as examples of current collaboration which can be used as a tool in setting up similar collaborations between our agency and other agencies.

___ Distribute categorized resource directory to all directors in student's district.

APPENDIX D

Brief Guidebook on Resource Utilization

A Fact Sheet on Resource Utilization

Barbara Bowman, in a keynote address at the 1995 Annual Conference of NAEYC's Institute for Early Childhood Professional Development, discussed the increased challenges facing America's families and the potential long range impact on their children. She stated that a greater number of families are trying to cope with stressors, and that these stressors are the most intense families have had to face since the Great Depression! Concurrently, the general public has become more self-serving, turning their perspective toward children of their own demographic group, versus the needs of all children in our society. One answer suggested by Bowman was to rethink the way we train education professionals to stress more collaboration with other professions; a more interdisciplinary approach would be necessary to best serve children and their families.

In 1988, a statement was issued by a representative of the National Association of State Boards of Education, which likewise called for a new focus in early childhood education. Their plea was for schools and agencies to partner in the collaboration of services to create a comprehensive system for families and programs available to them. They stated that parents generally view the Administrator -- or Director -- as knowledgeable in all areas relating to the care and development of their children. As a result, s/he is expected to be a resource in identifying and solving problems. Awareness of outside resources is then an important vehicle to assist the parent and child in coping with a situation (Good, 1996). This access and use of community resources empowers the parent to nurture and protect their child (Pizzo, 1993). Services can include not only public and government services, but also the opportunity to network with other adults (Galinsky, 1984) to share time, personal skills, experiences and solutions with one another.

A family strengths model wherein the director works with the family as a whole -- such that the center and the family partner together with the child as the common bond -- requires the Director to be aware of a multitude of family support services (Gage & Workman, 1994). The individual program and its director can not possibly offer all of the services a family may require in order to best meet the needs of the child and its family (Strimple, 1992). Knowledge of external services and collaboration with other agencies is an opportunity for the Director of a child care center to facilitate family resources and solutions.

To collaborate with other agencies is an opportunity for each provider to focus on their specialty, thus offering the family a more comprehensive menu of services. The Director serves as an information source

to not only link the services families need, but to also see that the family is receiving the correct services.

The key to collaboration is to remember that in order to be successful, collaborations must involve people, not just agencies (Bruner, 1991). Agencies that serve families have the common goal of empowering the family to cope as best it can in the face of our complex society. As such, collaboration can be a surprisingly simple process. Pick up the phone. Call. Collaboration is a skill, and like any skill it improves with practice. Your network of resources will begin to web and your families will vastly benefit as a result..

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APPENDIX E

Newsletter Article

Focus on Families...

Our mission is to help young children reach their full potential. To achieve this, we as a company acknowledge the daily need to support families as partners. As a center, we have the opportunity to play a vital role in offering families more than just child care. We represent a community; a safe haven; a resource.

Society is so mobile! Research shows that over the course of a lifetime, some families will have moved as much as fourteen times!! With each move, families must adjust to new communities, new child care providers, new jobs, new subcultures, new friends... new everything. Often the child care center is viewed as a source of information for the family.

Other families may have lived in the area for a long time, but are currently facing a crisis of some kind. Life has become so complex, that researchers now state that *all* families will need support at some time. An entire field of family support has evolved to reflect this increasing need. Again, we as child care providers can ease a family's stress and help them find the resources they need.

At a recent District Meeting, your Director was given a copy of *Resource Directory: A Guide to Services for Children, Youth & Their Families*. This lists services available for families facing adoption, alcoholism, blind/visually impaired, breastfeeding, cultural issues, deaf, death/dying/bereavement, domestic violence & child abuse, health related issues, those in need of government services, hotlines, mental health issues, sudden infant death syndrome, single parenting, special needs and stuttering.

We would like to have a regular column appear on family support. If you have information you would like to share or information you would like to see submitted, please contact the editor, Katherine Cain or Karen Rucker at DOEG. This would include agencies that help families, organizations, support groups, hot lines, places to send away for information, etc. Of particular interest would be internet sites you have found to be especially useful for families.

Karen L. Rucker, DOEG

APPENDIX F

Meeting Agenda to Include Director Training

MID-ATLANTIC DISTRICT
DIRECTOR'S MEETING
JULY 16, 1997 - DOEG

AGENDA

A. Center Up-Dates
   1. Accreditation
   2. Summer Programming
   3. Fall Planning and Parent Education Activities
   4. Marketing Up-Dates and Activities

B. News/Information
   1. Development Activities in the District
      a. Virginia hospital center
      b. Philadelphia center
      c. Federal center
      d. National organization center
      e. Bank center
   2. Packing Slips
   3. Parent Surveys
   4. Center Visit Format/Feedback
   5. Faculty and Center Information
   6. Fiscal Year 1998 Goals - District and Center
   7. Personnel Policies and Benefits Information
   8. Unemployment Training
   9. Corporate Sponsor Information
   10. Partner's Path - September 17, 1997
   11. Finance Department Visits
   12. Board Handbook

C. Predictive Index

D. Resource Directory – Karen Rucker

E. Training
   1. District Training Day
   2. Training Plan - FY 98
   3. Level One Orientation

F. Recruitment
   1. Field Team
      a. Evaluations
      b. Procedures
      c. Temporary Help Usage
   2. Position Openings

APPENDIX G

Training Outline

Training Outline

I. How the practicum project come about

II. Why outside resources are necessary

III. Family support as an extension of the company's mission statement

IV. Presentation of the Resource Directory

V. Review of key agencies in the directory

VI. Information on accessing government services to low income families

VII. Future plans for expansion of the Directory

VIII. Questions and Answers

APPENDIX H

Resource Directory of Services Available to

Children, Youth & Their Families

PS

Resource Directory

of Services Available to Children, Youth & Their Families

Compiled 1997
Karen L. Rucker

Table of Contents

Adoption	3
Alcoholism	4
Blind/Visually Impaired	5
Breastfeeding	6
Cultural Programs	7
Deaf	9
Death, Dying & Bereavement	10
Diagnostic Services	13
Domestic Violence & Child Abuse	14
Family Services & Support	15
Government Programs	19
Health Related Issues	23
Information Lines	28
Mental Health Issues	29
Parenting Classes	30
SIDS: Sudden Infant Death Syndrome	31
Single Parenting	32
Special Needs	33
Stuttering	37
Internet Resources	38
Alphabetized Listing of All Agencies and Organizations	40
Index	43
References	

Adoption

Adoption Resources, Inc. 703-440-5771
Offers support and information to adoptive parents.

Adoptive Families of America 800-372-3300
Provide literature, including the "1996 Guide to Adoption," which is a comprehensive manual on adoption issues.

Barker Foundation 301-229-8300 or 800-673-8489
Support groups for adoptive parents.

Center for Adoptive Families 301-439-2900
Support and information for families of adopted children.

Project Succeed 301-933-7333
Parent education and support groups at various locations for parents of adopted special needs children.

Alcoholism

Alcoholics Anonymous
National number 800-477-3447
P.O. Box 459, Grand Central Station, NY, NY 10163
Northern Virginia 703-281-7501
Prince William County, VA 703-494-4781
Maryland and D.C. 202-966-9115
Local chapters in most major geographic regions. Self help program with the support of others. Also offer programs for children and families of an alcoholic family member.

Children of Alcoholics (NACoA) 301-468-0985
National organization providing resources for children of alcoholics.

National Organization on Fetal Alcohol Syndrome 800-66-NOFAS
Information on Fetal Alcohol Syndrome.

Blind/Visually Impaired

American Foundation for the Blind 800-AFB-LINE
11 Pen Plaza, Suite 300, NY, NY 10011

Blind Children's Fund 517-333-1725
Offer materials and resources for families and care providers of children who are blind, visually or multi-impaired.

Guiding Eyes for the Blind 914-245-4024
National organization that trains and places guide dogs.

Breastfeeding

Breastfeeding Consultants of Northern Virginia 703-207-9091
Falls Church, VA

LaLeche League
National number 847-519-7730
For locations in DC and MD, call 202-328-6745 or 202-342-2400
For locations in VA, call 703-534-8416 or 703-524-9231
Has groups in most geographic regions. Information and support for lactating mothers. Some chapters loan breast pumps.

National Capital Lactation Center 202-784-MILK
Located at Georgetown University Hospital.
Offer services in D.C., Annandale, VA and Rockville, MD.

Northern Virginia Lactation Center 703-425-BABY
Breastfeeding support group with information on issues related to breastfeeding, including night feedings, schedules, issues for the working mother, expression, storage of breast milk, and managing the logistics of breastfeeding.
**Fee charged for support group.

Cultural Programs

Bienvenidos, Inc. 703-931-9740
Hispanic organization offering information and referrals, including enhancement of local social service programs.

Chinese Culture and Community Service Center 301-530-1314
Provide education and training on Chinese culture. Support services for families.

Hispanic Committee of Virginia (Comite Hispano de Virginia)
703-671-5666
5827 Columbia Pike, Second Floor, Falls Church, VA 22041
Serving families residing in Virginia. Emergency assistance, immigration counseling, translations, mental health counseling, and information & referrals.

Indochinese Community Center (ICC)
Washington, D.C. 202-462-4330
1628 16th Street, NW, Washington, DC 20009
Virginia 703-241-0300
6131 Willston Drive, Room 8, Falls Church, VA 22044
Outreach for refugees from Ethiopia, Afghanistan, China, Central America, Vietnam, Cambodia, Laos and Eastern Europe. Translation assistance, crisis intervention and counseling. Citizenship training.

Cultural Programs

Korean Community Service Center of Greater Washington
301-933-7010
11141 Georgia Avenue, Suite 204, Wheaton, MD 20902
Translation and interpretation services. Information and referral, including family, individual and group counseling. Workshops. Alcohol counseling and education. HIV/AIDS Awareness Project (KHAP).

Spanish Education Development (SED) Center 202-462-8848
Provide services to Latin American immigrants, including educational programs for children ages two through four.

Deaf

Alexander Graham Bell Assn. for the Deaf 800-255-4817
3417 Volta Place, NW, Washington, DC 20007

American Speech Language Hearing Assn. 800-638-8255
10801 Rockville Pike, Rockville, MD 20582
Provides general information and a referral listing of local resources available in various geographic locations. Information on sign language.

Dogs for the Deaf 541-826-9220
National organization that trains and places canine helpers for the deaf.

Northern Virginia Resource Center for Deaf & Hard of Hearing Persons
703-352-9055
Provide information, referral and support for families with members who are deaf or hard of hearing. Offer a newsletter, fact sheets, workshops, technical assistance, advocacy and product information.

Southern Maryland Association For Deaf Children 301-638-2628
Social activities, sign language classes, lending library and workshops for families with children that are deaf or hard of hearing. Promote deaf awareness, deaf culture and history.

Death, Dying & Bereavement

See also SIDS

Children's Hopes & Dreams – Wish Fulfillment Foundation
800-437-3262
National organization that fulfills last dreams of terminally ill children. Provide pen-pal friends.

Compassionate Friends
National number 708-990-0010
P.O. Box 3696, Oak Brook, IL 60522
For locations in the DC metro area 202-244-1026
Locations throughout various geographic regions. Offer support for families coping with the death of a child.

Grant a Wish Foundation 800-933-5470
National organization. Wish granting, beach and mountain retreats, Children's House at John Hopkins, and support group network.

Holy Cross Hospital 301-754-7742
Silver Spring, Maryland. Bereavement support groups for both children and adults.

Hospice of Frederick County (MD) 301-694-6444
Support for families facing a life-threatening situation or who are in grief.

Death, Dying & Bereavement

Hospice of Northern Virginia 703-534-7070

Hospice of Prince George's County, Inc. 301-499-0550
Offer emotional support to terminally ill patients and their families.

Hospice Care of the District of Columbia 202-347-1700

Hospice Caring, Inc. 301-869-HOPE
Offer support groups throughout Montgomery County, MD. "Empty Arms" meets monthly in Rockville, for families who have lost children at childbirth. Bereavement groups held in Bethesda and Gaithersburg.

MIS (Miscarriage, Infant Death, Stillbirth) 301-681-5784
Support group for parents who have lost an infant through miscarriage, SIDS or still birth. Meet monthly at Holy Cross Hospital in Montgomery County, MD.

Montgomery Hospice Foundation 301-279-2566
Provides support for family members of clients utilizing their hospice services.

Parents of Murdered Children 513-721-5683
Support, information and advocacy for families of homicide victims.

Death, Dying & Bereavement

Rainbows for All God's Children 301-299-4087
Twelve week support groups for children and youth dealing with death, divorce, separation or abandonment. Sponsored through Jonah's Ministry.

Tommy Kelleher Memorial Foundation 703-490-4828
Provide special activities for children with cancer and other terminal illnesses. No child is turned away from services.

Diagnostic Services

Chesapeake Center
Maryland 301-942-6766
10400 Connecticut Avenue, #206, Kensington, MD 20895
Virginia 703-924-4100
6506 Loisdale Road, 3rd Floor, Springfield, VA 22150-1815
Consultations, screenings, diagnostics, treatment plans and service coordination. On- and off-site evaluation of speech and hearing. Speech-language therapy, physical therapy and occupational therapy. Also offer therapeutic play groups.
(Many of their services are covered by medical insurance.)

Connect for Success 301-570-0780
17717 Globe Theatre Drive, Olney, MD 20832
A team of mental health professionals who identify and provide services for children infant through school-age with emotional or behavioral problems. Flexible hours, including evenings. Design intervention plans to be used both in the home and the child care setting. Refer families to outside resources as appropriate.

Directory of Services for Children and Youth
State of Maryland
A comprehensive directory of services offered in the State of Maryland for children, youth and their families is available on "Sailor." This Maryland On-line Public Information Network is accessible at any Maryland library at terminals designated "Sailor." Both public and private agencies are listed and are accessible by asking the computer to sort via one or more of the 38 fields in this program.

To access the directory, follow these steps:
Enter Sailor. *Select* [7] Communities. *Select* [5] Multi County and Statewide. *Select* [8] MD Community Information Resources. *Select* [11] Directory of Services for Children & Youth (DCYF). *Follow directions for locating services.*

Domestic Violence & Child Abuse

Heartly House 301-662-8800
Frederick, MD
Domestic violence program. Services available for children who have witnessed domestic violence or been the victim of sexual abuse/assault. Temporary shelter provided for those who need to escape violence in the home, counseling, court advocacy, referral to other service providers, and community education. Also offer batterers' services, for men who want to discontinue their violence. Counseling, referrals, and court & medical advocacy for current or prior victims of rape, incest or sexual assault.
24-hour crisis line 301-662-8800.

National Coalition Against Domestic Violence 303-839-1852
National organization. Provide information, referrals, and community education to end domestic violence and to assist battered women and their children.

National Domestic Violence Hotline 800-799-SAFE
National organization providing 24-hour services, including information, referrals and support to victims of domestic violence.

Parents Anonymous 909-621-6184
National organization with local chapters. Public education on child abuse. Some chapters offer anonymous support and education for parents who abuse, or are at risk of abusing, their children. Specialized programs for children. Parent support groups.

People Against Child Abuse, Inc. (PACA) 800-CHILDREN
Based in Maryland
Offer direct services including home visits to new parents and public awareness campaigns to prevent child abuse and neglect.

Family Services & Support

Among Friends, Inc. 202-722-7004
Provide support services for gays and lesbians in crisis, including housing, meals, peer counseling, job search assistance and workshops on health issues.

The Center for Divorcing Families 301-244-8871 or 301-840-2006
Classes and workshops for separating families, including information on helping children deal with divorce and coping strategies. Support groups, literature and referrals/telephone counseling.

Children's Foundation 202-347-3382
725 15th Street, NW #505
Washington, DC 20005-2109
Provide information on issues of critical concern to families, including federal food programs, health care, and enforcement of court-ordered child support on both the local and national levels. Publications, training manuals, brochures and fact sheets are available in both Spanish and English.

Federal Employee Education & Assistance Fund
202-833-6233 or 800-323-4140
Services available to all federal and postal employees, and their dependents. Offer emergency loans, grants, educational loans and scholarships. Emergency assistance is available to employees who have experienced a disaster or expected emergency, including a death in the family, abandonment by a spouse, or illness. Will also offer interest-free loans during furloughs to pay for rent/mortgage, food and utilities.

Family Services & Support

Friends of the Family, Inc. 410-659-7701
1001 Eastern Avenue, 2nd Floor
Baltimore, MD 21202
Serving families who are residents of the State of Maryland. Offering information on family services throughout the Maryland region.

Grandparents Raising Grandchildren 703-533-2548
Offered through Northern Virginia Family Service. Meetings are held in Arlington, Dale City, Alexandria, Reston, Fairfax/Springfield and Falls Church.

Healthy Families, Alexandria 703-370-3223
Northern Virginia Family Service
5249 Duke Street, Suite 308
Alexandria, VA 22304
Designed for first time parents. Infant must be under the age of two months to join the program, and can still in it for up to three years. This is a free program for residents of the City of Alexandria. Work in the home or at a convenient location to train parents in developmentally appropriate expectations for infants and toddlers. Also give instructions in basic care. Link families to other new parents and other community services. Toy lending library.

Jewish Social Service Agency

District of Colombia	202-887-1644
Rockville, MD	301-881-3700
Gaithersburg, MD	301-990-6880
Annandale, VA	703-750-5400

Parenting classes, ADHD clinic, support groups, group and individual therapy for children, adolescents and their families. Evaluation and counseling for children, including developmental delays and disabilities. Psychiatric evaluation and assessment. Home health/hospice for children. Adoption programs. Newcomer resettlement. Family mediation.
Non-sectarian. Parents pay on a sliding scale.

Family Services & Support

Mothers of Multiples

Fairfax County	703-715-MOMS
Montgomery County	301-294-0014
Loudoun/Fairfax Mothers of Multiples	703-631-4058
Washington, DC	301-933-6302

Active in most major geographic regions. Support groups for mothers of twins and other multiple births. Different groups offer different services. Most have guest speakers on topics relevant to multiple births and coping skills. Some groups have clothing and equipment exchanges.

Mother's Matters, Inc. 301-495-3394 or 703-620-3323

Pre- and post-partum services, including lactation consultation, counseling & guidance on infant nutrition, and mother-baby massage. Staffed by R.N.'s and lactation consultants.

National Fatherhood Initiative 301-948-0599

One Bank Street, Gaithersburg, MD 20878

Newsletter and resource catalog on fathering issues, including single parenting and information on how to be a better father. Advocacy efforts, recommended fatherhood products and a speakers' bureau.

National Foster Parent Association 608-274-9111

National organization. Offers support to foster parents, particularly those who are caring for abused or neglected children.

Prince George's Child Care Resource Center 301-772-8420

Provide family support services.

Family Services & Support

Stepfamily Association of America 800-735-0329
215 Centennial Mall South, Lincoln, NE 68508-1834
Resource information on the stages blended families experience. Newsletter.

Support Group for Mothers & Fathers of Infants and Toddlers
202-244-8871

Government Programs

Child Care Subsidies
Montgomery County 301-217-1155
Working Parents Assistance Program and Purchase of Care to provide child care assistance to low income families.

Child Protective Services
Montgomery County 301-217-4417
24 hour referral intake line for suspected cases of child abuse or neglect.

Children's Resource Center
Montgomery County Department of Family Resources
332 West Edmonston Drive, Rockville, Maryland
Converted school that houses a number of programs for children and their families.

- **Arc of Mtgy Cty Family and Infant Care Center** 301-279-2165

Serves infants and toddlers with medical conditions. Nursing staff available at all times. Also offer parenting education and support, as well as training and outreach services.

- **Mtgy Cty Infants and Toddlers Program** Ofc: 301-279-1250

Available to Montgomery County residents only. Intake: 301-279-1813
Part H program offered as a collaboration between Mtgy Cty Department of Health and Human Resources and the Mtgy Cty Public School System. Early intervention program for children *under* the age of three. Locates, coordinates and provides services for those diagnosed as developmentally delayed. Will conduct a home visit to do assessments. Once a delay is identified, will design an IEP and link families with other community resources.

- **Parenting Resource Center** 301-279-6497

Offer parenting classes, as well as training for providers. Has a drop-in play program to promote learning through parent-child play as various locations throughout the county. Also have resources available to families to enhance their role as nurturers.

Government Programs

- **Prevention Center Resource Library** 301-770-3280

Books and videos available on loan pertaining to tobacco, alcohol and drug use. Also offer free posters, fact sheets and pamphlets.

- **Therapeutic Nursery Program** 301-279-1051

Comprehensive preschool program for children ages three and four who have been identified with emotional or behavioral disorders.

Department of Health & Human Services
Montgomery County 301-217-1245
Services for children, youth and their families, including public health services, crisis income & victim services, and substance abuse services.

Income Support

Maryland:	Germantown	301-217-3420
	Rockville	301-468-4310
	Silver Spring	301-217-3000

Food Stamp program, Temporary Cash Assistance (TCA), Medical Assistance Program and Transitional Emergency Medical and housing Assistance Program (TEMHA) for the disabled.

Part B/Part H of the Individuals with Disabilities in Education Act (IDEA)
Part B – children ages 3 through school-age
Law requires, that upon request by the parent – or request from a teacher, with written parent consent – a child will be evaluated by the school system to detect developmental delays. Many states define a child needing services as having a 25% delay in at least one developmental area. Once identified as delayed, the school must provide services *at no cost* to the parent or guardian.
**Contact the local school district serving the child and request the special education coordinator for information on this entitlement.

Government Programs

Part H – infancy through age two
Similar to Part B, but for younger children. Services are to be provided by the State vs. the school district. Contact your local department of services to children, youth and their families for information on which agency is responsible for this service in your area.

- **Maryland Early Intervention System** 800-535-0182

Call to obtain information on Part H providers in the State of Maryland.

- **Montgomery County** Ofc: 301-279-1250

Infants and Toddlers Program Intake: 301-279-1813
Locates, coordinates and provides services for those under age of three diagnosed as developmentally delayed. Will conduct a home visit to do assessments. Once a delay is identified, will design an IEP and link families with other community resources.

Pregnant Women and Children's Program
Available to Maryland State residents.
Contact local health department and ask for Pregnant Women and Children's Program.
Low-income assistance with pre-natal care and health care for mother/infant after delivery. Some counties also offer home visiting services and nutrition services as part of the Americans with Disabilities Act.

Social Security Administration 800-772-1213
Information on eligibility for Medicare and benefits available to survivors and the disabled.

WIC (Women, Infants & Children) 800-242-4WIC

Maryland:	Howard County	301-313-7510
	Montgomery County	301-762-9426 or 301-515-7576
	Prince George's County	301-856-9600

Federally funded program to provide food to pregnant women, new mothers and children under the age of five. Eligibility is based on annual income. Family is given WIC checks to use at the grocery store to purchase WIC approved foods, including formula, milk cheese, eggs and cereal.

Current income guidelines for the State of Maryland:

Family Size	Annual Income	Family Size	Annual Income
2	$19,166	3	$24,013
4	$28,860	5	$33,707

Health Related Issues

See also: ***Alcoholism***
Blind/Visually Impaired
Deaf
Death, Dying & Bereavement
Mental Health Issues

Allergy and Asthma Network/Mothers of Asthmatics 800-878-4403
National organization. Education, support and advocacy for parents of allergies and asthmatics

Association for the Care of Children's Health 301-654-6549
3615 Wisconsin Avenue
Washington, D.C. 20016
Concerned with the emotional comfort of children that are hospitalized. Offers resources and support for families.

Asthma and Allergy Foundation of America
National number 202-466-7643
Maryland Chapter 410-321-4710
National organization. Provide training and support for families with members who have asthma or allergies. Publish a newsletter and have other literature available.

Capital Area Pediatric Heartburn and Reflux Assn. 301-601-9541
Offers information and support for parents of children with gastroesophaegeal reflux.

Health Related Issues

Cleft Palate Foundation 800-24-CLEFT
National organization providing information and referrals for families of children born with cleft palate and other facial defects.

Epilepsy Foundation of America
National number 800-332-1000
4361 Garden City Drive, Landover, MD 20785
D.C. area 202-293-0532
Resources and materials on epilepsy.

Food Allergy Network 800-929-4040
National organization providing information and support for families with food allergies.

Forget-Me-Not Foundation
123 Bedell Avenue, P.O. Box 404, Clintondale, NY 1251-0404
This organization offers support and resource referral for family members who have brain damage, either from an accident, disease or malfunction. Originated by a brain damage survivor and her husband, the organization is dedicated to serving not only the emotional needs of the families, but resultant crisis such as the financial impact of medical treatment.

HIV/AIDS

- **Family Life Center** 410-997-3557 or 301-596-4568

Confidential support group to increase coping strategies and decrease isolation.

- **Food & Friends** 202-488-8278

Provides meals to those homebound due to HIV/AIDS in the Washington metropolitan area, including many of the rural areas of Maryland and Virginia. Three meals are delivered mid-day. A grocery delivery service is available.

Also provide information and workshops on HIV/AIDS, nutrition and cooking classes. Through collaboration with other agencies, they provide information on support groups, legal programs and retreats.

- **Pediatric AIDS Foundation** 310-395-9051

1311 Colorado Avenue, Santa Monica, CA 90404
Primarily focused on pre-natal transmission of HIV/AIDS. Set of videos titled "HIV/AIDS: A Challenge to Us All" is available to families at no fee.

Human Growth Foundation 800-451-6434
National organization. Information and advocacy for families with children with growth-related disorders.

Juvenile Diabetes Foundation
Capitol Chapter 202-371-0044
1400 I Street, NW, Suite 500, Washington, D.C. 20005
Located in various geographic areas. Resources and information, as well as support groups for children.

Magic Foundation for Children's Growth 800-3MAGIC3
National organization. Supports families of children with growth disorders through newsletters, networking, and literature. Support groups in some geographic locations.

Nar-Anon
Maryland locations 410-876-4316
Support groups for friends and families of substance abusers.

Health Related Issues

Second Genesis 301-656-1545
Main office in Bethesda, MD
A residential drug and alcohol treatment center with five sites in Washington, Maryland and Virginia. Counseling programs and support groups for the family members.

SICKLE CELL

- **Armstead-Barnhill Foundation for Sickle Cell Anemia** 301-590-9446

Primarily seek funds to further research to find a cure, but also man a hotline for information

- **Sickle Cell Disease Association of America**

National number 800-421-8453
Greater Washington Area 202-806-6140
Maryland Chapter 410-383-2214
Strive for public awareness. Offer free literature, education and testing. Counseling and emergency grants for sickle cell clients. DC chapter is affiliated with Howard University.

Shriners Hospitals for Crippled Children
National number 800-241-4438
Maryland 410-435-1600
Offer free medical care for problems including scoliosis, hand or back problems, spina bifida and problems related to burns. Local screening clinics are held periodically.

Spina Bifida Association
National number 800-621-3141
4590 MacArthur Boulevard, Suite 250, Washington, DC 20007-4226
Washington Metropolitan Area 301-805-0213
Provide information through newsletters, support groups, seminars, parent outreach, medical assistance and recreation programs.

Health Related Issues

United Cerebral Palsy Association
National number 800-872-5827
1660 L Street, NW, Washington, DC 20036-5602
DC and Northern VA 202-269-1500
Information, equipment, advocacy and direct family services.

Information Lines

Community LINC of Montgomery County 301-217-0500
Clearinghouse. Provide information on counseling/therapy, financial assistance, food/nutrition, health care, housing, mental health service, parent services, emergency/crisis services, immigration services, victim services, adaptive equipment and assistive technology.

Crisis Hotlines

Arlington, VA	703-358-5150 or 703-358-4848
D.C.	202-223-0020
Montgomery County, MD	301-738-2255
Northern Virginia	703-527-4077 or 703-527-6603
Prince William Cty, Manassas, VA	703-368-4141

Parent Warmline 301-929-WARM
Sponsored by The Family Works, in collaboration with Child Care Connection and Montgomery County Schools, the Warmline offers advice, reading materials, if appropriate, referrals. Both English and Spanish speaking volunteers. Caller leaves a message and the volunteer most suited to answer that particular question will call back within 24 hours. Can not take calls that are medically related or a crisis situation.

Mental Health Issues

American Academy of Child & Adolescent Psychiatry 202-966-7300
3615 Wisconsin Avenue, NW
Washington, DC 20016
Publishes "Facts for Families," as series of 50 information sheet on topics such as childhood depression, discipline, and child sexual abuse.

National Alliance for the Mentally Ill
National number 800-950-NAMI
Montgomery County 301-229-7811
7300 Whittier Blvd., Bethesda, MD
National Organization offering information and support groups for families with mentally ill members, including depression, and children diagnosed with neurobiological disorders.

National Mental Health Association 800-969-6642
1021 Prince Street, Alexandria, VA 22314-2971

Parenting Classes

Adler-Dreikers Parenting Program 410-730-3987
Faulkner Ridge Neighborhood Center in Colombia, MD.
Parenting classes in discipline, self esteem, and other parenting issues.

Family Education Network 301-888-1020
Offer parenting classes in D.C., Maryland and Virginia. Marriage enrichment classes. Speaker's bureau.

PACE (Parenting After Childbirth Education) 301-983-9133
Groups meet in Maryland, DC and Virginia. Workshops include parenting the newborn. Support groups for mothers and fathers. 8-week parenting series for new parents.

Parent Encouragement Program (PEP) 703-550-4094 or 301-929-8824
Offer parenting classes, as well as classes on families and marriage. Issues include parenting; managing anger; sibling rivalry; positive discipline; setting limits on television viewing, computer games, and the internet. Extensive work with families of special needs children.

Parenting Education Center 703-846-8670
Offers a variety of classes, services and seminars to help parents.

Parent Education Network (PEN) 301-424-3747
Information on child rearing issues.

SIDS: Sudden Infant Death Syndrome

See also: Death, Dying & Bereavement

American SIDS Institute
National number 800-232-SIDS
Northern VA Chapter 703-385-7299
National organization. Offer support groups for parents who have lost children to Sudden Infant Death Syndrome.

SIDS Educational Services, Inc. 301-322-2620
Support families and professionals grieving babies lost to SIDS. Informational materials are available.

Sudden Infant Death Syndrome Alliance
National number 800-221-SIDS
1314 Bedford Avenue, Suite 210, Baltimore, MD 21208
Virginia Chapter 800-849-7437
Offer education to inform families of reducing their baby's risk. Provide support for SIDS families. Numerous inexpensive publications available.

Single Parenting

National Organization of Single Mothers, Inc.
National Number 704-888-2337 or 704-888-KIDS
Maryland 301-649-4633 or 301-949-5167
Bimonthly newsletter for single mothers on addressing the challenge of parenting alone. Local chapter has a support group that meets in Wheaton, MD.

Parents Without Partners
National number 312-644-6610
401 N. Michigan Avenue, Chicago, IL 60611-4267
District of Colombia 202-638-1320
Maryland 301-588-9354
National organization. Family events, discussion groups and adult socials.

Single Mothers By Choice 212-988-0993
Provides support and information to single mothers in their 30's and 40's who have chosen to have children outside of marriage.

Single Parents Raising Kids (SPARK)
Maryland 301-468-4015 or 301-340-8037
Meet monthly at various locations to discuss issues unique to single parents.

Special Needs

See also: Government Programs
Health Related Issues

ADA Information Line 800-514-0301
Disability Rights Section, Civil Rights Division TDD: 800-514-0383
U.S. Department of Justice
P.O. Box 66738
Washington, DC 20035-9998

Arc (Formerly the Association for Retarded Citizens)
National number 800-433-5255
P.O. Box 1047, Arlington, TX 76004-1047
D.C. 202-636-2950
Montgomery County 301-984-5792
Northern Virginia 703-532-3214
Prince George's County 301-925-7050
Prince William County 703-670-4800
Provide information, referrals and services for families with mental retardation, including early childhood intervention.

Attention Deficit Disorder Association 800-487-2282
P.O. Box 972, Mentor, OH 44061

Autism Society of America
National number 800-3-AUTISM
7910 Woodmont Avenue, Suite 650, Bethesda, MD 20814-3015
DC Chapter 202-561-8527
Montgomery County 301-652-3912
Northern Virginia 703-799-3773
Chapters in several geographic regions. Provide community information and support groups for families with an autistic member. Some chapters also offer training for care providers.

Special Needs

C.H.A.D.D. (Children & Adults with Attention Deficit Disorders)
National number 954-587-3700
Montgomery County 301-869-3628
National organization with local chapters. Information and support for families with children diagnosed as ADD or ADHD. Newsletter.

Community Services for Autistic Adults and Children (CSAAC)
301-762-1650
Provide educational and other supportive programs for persons with autism.

Council for Exceptional Children, Division for Early Childhood
800-328-0272
1920 Association Drive, Reston, VA 22901-1589

Down Syndrome Congress, National 800-232-NDSC
National organization. Offers information and support to families.

Golden Access Passport
Allows lifetime, free entrance to each of the 370 national parks, as well as historical sites and recreation areas on federal land. Most parks allow rest of the passengers in the car to enter for free also. Substantial discount on camping and some museum entrances. Passes may be obtained at any federal park visitor center or entrance station.

Special Needs

Hyperactivity Hotline 703-524-5566
Provide information and assistance to families with an ADD/ADHD child, including information on behavior management and environmental sensitivities which may effect their child.

Learning Disabilities Association
National number 412-341-8077
4156 Library Road, Pittsburgh, PA 15234
Montgomery County 301-933-1076
A volunteer group of parents, teachers and professionals that offer a parent advisory service, a newsletter, legislative information and reference materials of families with members who are diagnosed as learning disabled. A comprehensive Special Needs Library is housed at the lower level of the Davis Library in Bethesda, Maryland.

National Down Syndrome Society 800-221-4602
666 Broadway, Suite 800, NY, NY 10012
National Organization providing free information to families with a Down Syndrome family member.

National Information Center for Children and Youth with Disabilities
800-695-0285
P.O. Box 1492, Washington, DC 20013
http://www.nichcy.org
Have an extensive resource list available on the topic of inclusion.

National Parent Network on Disabilities 703-684-6763
National organization. Provide families with information, advocacy training and support to protect their children with disabilities.

Special Needs

Parents of Gifted and Learning Disabled Children 301-986-1422
Meetings, newsletters, workshops and resources for parents and providers of gifted and learning disabled children.

Reginald S. Lourie Center for Infants and Young Children
301-984-4444
Early intervention services for children with developmental and emotional problems, from infancy through age eight. Comprehensive services for families and children.

Special Olympics International 202-628-3630

St. John's Community Services -- Early Intervention Program
202-338-3726
4880 MacArthur Boulevard, NW, Washington, DC 20007
Early intervention program serving infants and toddlers with developmental delays and health related problems. Interdisciplinary approach, including speech/language therapy, OPT, medical support, counseling and home visits. Collaboration with other agency to expand service delivery. Services offered on site, in home and at child care setting. Partially funded by Part H.

Treatment and Learning Centers 301-424-5200
Rockville, Maryland
Services include audiology, therapeutic child care, head injury services, infant development program, occupational/physical therapy and evaluation, speech/language therapy and evaluation, and educational testing.

Stuttering

National Institute of Health 301-869-0298 or 703-942-5503
Stuttering support groups at their Bethesda, MD location.

National Stuttering Project 800-364-1677
National organization. Provides support and information about stuttering.

Stuttering Foundation of America
3100 Walnut Grove, Suite 603
P.O. Box 11749
Memphis, TN 38111-0749
Publish numerous inexpensive or free brochures and books on stuttering. A video titled "Stuttering and Your Child: A Videotape for Parents" is offered at no charge to public libraries. Parent need to have their library request the tape from the Foundation.

Internet Resources

Bright Horizons
http://www.brighthorizons.com
Parenting information.

CYFERNET
gopher://gopher-cec.mes.umn.edu
Information on children, youth and their families, including ADOPTINFO, FATHERNET and PAVNET (Partnerships Against Violence).

DHHS
http://www.acf.dhhs.gov
U.S. Department of Health and Human Services publications, program descriptions and services.

ERIC/EECE
http://ericps.ed.uiuc.edu/ericeece.html
Publications and routes to search the ERIC database. Current research, listings and abstracts of child related information.

MAYO HEALTH O@SIS
http://www.mayo.ivi.com
Sponsored by the Mayo clinic. Provides information on diseases, treatments and drugs.

Internet Resources

MCHNet
gopher://mchnet.ichp.ufl.edu
Information on health related issues.

NPIN
http://ericps.ed.uiuc.edu/npin/npinhome.html
Information on early childhood for parents and educators.

Alphabetized Listing of All Agencies and Organizations

ADA Information Line 33
Adler-Dreikers Parenting Program 30
Adoption Resources, Inc 3
Adoptive Families of America 3
Alcoholics Anonymous 4
Alexander Graham Bell Assn. for the Deaf 9
Allergy and Asthma Network/Mothers of Asthmatics 23
American Academy of Child & Adolescent Psychiatry 29
American Foundation for the Blind 5
American SIDS Institute 31
American Speech Language Hearing Association 9
Among Friends, Inc 15
Arc 19, 33
Armstead-Barnhill Foundation for Sickle Cell Anemia 26
Association for the Care of Children's Health 23
Asthma and Allergy Foundation of America 23
Attention Deficit Disorder Association 33
Autism Society of America 33
Barker Foundation 3
Bienvenidos, Inc 7
Blind Children's Fund 5
Breastfeeding Consultants of Northern Virginia 6
Capital Area Pediatric Heartburn and Reflux Association 23
Center for Adoptive Families 3
Center for Divorcing Families 15
Chesapeake Center 13
C.H.A.D.D. (Children & Adults with Attention Deficit Disorder) 34
Child Protective Services 19
Children's Foundation 15
Children's Hopes and Dreams - Wish Fulfillment 10
Children's Resource Center 19
Children of Alcoholics (NACoA) 4
Chinese Culture and Community Service Center 7
Cleft Palate Foundation 24
Community LINC 28
Community Services for Autistic Adults and Children (CSAAC) 34
Compassionate Friends 10
Connect for Success 13
Council for Exceptional Children 34
Crisis Hotlines 28
Department of Health & Human Services 20
Directory of Services for Children and Youth 1
Dogs for the Deaf 9
Down Syndrome Congress, National 34
Epilepsy Foundation of America 24
Family Education Network 30
Family Life Center 24
Federal Employee Education and Assistance Fund 15
Food & Friends 24
Food Allergy Network 24
Forget-Me-Not Foundation 24
Friends of the Family 16

Golden Access Passport 34
Grandparents Raising Grandchildren 15
Grant a Wish Foundation 10
Guiding Eyes for the Blind 5
Healthy Families, Alexandria 16
Heartly House 14
Hispanic Committee of Virginia (Comite Hispano de Virginia) 7
Holy Cross Hospital 10
Hospice Care of District of Columbia 11
Hospice Caring, Inc. 11
Hospice of Frederick County 10
Hospice of Northern Virginia 11
Hospice of Prince George's County 11
Human Growth Foundation 25
Hyperactivity Hotline 35
Indochinese Community Center (ICC) 7
Jewish Social Service Agency 16
Juvenile Diabetes Foundation 25
Korean Community Service Center of Greater Washington 7
LaLeche League 6
Learning Disabilities Association 35
Magic Foundation for Children's Growth 25
Maryland Early Intervention System 21
MIS (Miscarriage, Infant Death, Stillbirth) 11
Montgomery County Infants and Toddlers Program 19, 21
Montgomery Hospice Foundation 11
Mother's Matters, Inc. 17
Mothers of Multiples 17
Nar-Anon 25
National Alliance for the Mentally Ill 29
National Capital Lactation Center 6
National Coalition Against Domestic Violence 14
National Domestic Violence Hotline 14
National Down Syndrome Society 35
National Fatherhood Initiative 17
National Foster Parent Association 17
National Information Center for Children and Youth with Disabilities 35
National Institute of Health 37
National Mental Health Association 29
National Organization of Single Mothers, Inc. 32
National Organization on Fetal Alcohol Syndrome 4
National Parent Network on Disabilities 35
National Stuttering Project 37
Northern Virginia Lactation Center 6
Northern Virginia Resource Center for Deaf & Hard of Hearing 9
PACE (Parenting After Childbirth Education) 30
Parent Education Network (PEN) 30
Parent Encouragement Program (PEP) 30
Parent Warmline 28
Parenting Education Center 30
Parenting Resource Center 19
Parents Anonymous 14
Parents of Gifted and Learning Disabled Children 36
Parents of Murdered Children 11
Parents Without Partners 32
Pediatric AIDS Foundation 25

People Against Child Abuse (PACA) 14
Pregnant Women and Children's Program..... 21
Prevention Center Resource Library..... 20
Prince George's Child Care Resource Center..... 17
Project Succeed..... 3
Rainbows for All God's Children..... 12
Reginald S. Lourie Center for Infants and Young Children..... 36
Second Genesis..... 26
Shriners Hospitals for Crippled Children..... 26
Sickle Cell Disease Association of America..... 26
SIDS Educational Services, Inc. 31
Single Mothers By Choice..... 32
Single Parents Raising Kids (SPARK) 32
Social Security Administration..... 21
Southern Maryland Association for Deaf Children..... 9
Spanish Education Development (SED) Center..... 7
Special Olympics International..... 36
Spina Bifida Association..... 26
St. John's Community Services - Early Intervention Program 36
Stepfamily Association of America..... 18
Stuttering Foundation of America..... 37
Sudden Infant Death Syndrome Alliance..... 31
Support Group for Mothers & Fathers of Infants and Toddlers..... 18
Therapeutic Nursery Program..... 20
Tommy Kelleher Memorial Foundation..... 12
Treatment and Learning Center..... 36
United Cerebral Palsy Association..... 27
WIC (Women, Infants & Children) 22
.....

Index

ADD/ADHD 16, 33, 34, 35

Adoption 3, 16

Alcoholism 4, 8, 20

Allergies 23, 24

Americans with Disabilities Act 21, 33, 35

Assault 14

Asthma 23

Autism 33, 34

Batterer's services 14

Behavioral problems 13, 20

Bereavement 10-12

Blind 5

Brain damage 24

Breastfeeding 6, 17

Cerebral Palsy 27

Child Abuse 14, 17, 28

Child protective services 19

Child support 15

Chinese services 7

Cleft Palate 24

Cultural programs 7-8

Deaf 9

Death 10-12, 15, 31

Developmental delay 13, 16, 19

Diabetes 25

Diagnostic Services 13, 16, 19-21, 36

Divorce 12, 15, 32

Domestic Violence 14

Down Syndrome 34, 35

Drug Abuse 20, 25, 26

Dying 10-12

Early Childhood Intervention 13, 16, 19-21, 33-36

Emotional problems 13, 20

Epilepsy 34

Family Services & Support 15-18

Fathering issues 17

Federal employee 15

Fetal Alcohol Syndrome 4

Foster parenting 17

Gay 15

Golden Access Passport 34

Government programs 19

Grandparents as parents 16

Grief 10-12, 31

Growth disorders 25

Guide dogs 5, 9

Health related issues 23

Hispanic services 7, 8

HIV/AIDS 8, 24-25

Hospice 10-12, 16

Hospitalization 23

Hotlines 28

Immigration 7, 28

Income assistance 15, 19-20, 22

Indochinese services 7

Internet 13, 38-39

Korean services 8

Lactation 6, 17

Latin American services 8

Lesbian 15

Mental health 7

Mental health issues 28, 29

Miscarriage 11

Multiple births 17

Murdered children 11

Occupational Therapy 13, 36

Orthopedic problems 26

Parenting education 16, 19, 30

Part B 20

Part H 19, 21, 36

Pediatric AIDS 25

Physical Therapy 13, 36

Post-partum services 17, 21

Rape 14

Reflex 23

Scoliosis 26

Sceenings 13, 36

Separation 12 15, 32

Sexual Abuse 17, 28, 29

Sickle Cell Anemia 26

SIDS 11

Sign language 9

Single parenting 32

Social Security Administration 21

Special Needs 3, 19, 28, 30, 33-36

Special needs advocacy 35

Speech-Language Therapy 13, 36

SIDS 31

Spina bifida 26

Stepfamily 18

Still birth 11

Stuttering 37

Terminally ill 10-12

Translation services 7, 8

Twins 17

Visually Impaired 5

Warmline 28

WIC 22

Wish fulfillment 10